## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003

031599/260277

| CLAIMS AS FILED - PA<br>(Column 1)   |  |   |              |                                       | (Column 2)      |                  |          | SMALL ENTITY TYPE  |                        |      | OTHER THAN          |                        |  |
|--|--|---|--------------|---------------------------------------|-----------------|------------------|----------|--------------------|------------------------|------|---------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | 27           |                                       |                 | •                |          | RATE               | FEE                    | ٦. ٔ | RATE                | FEE                    |  |
| FOR  |  |   | NUMBER FILED |                                       | NUMBER EXTRA    |                  |          | BASIC FEE          | 385.00                 | OR   | BASIC FEE           | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | 27 minus 20= |                                       | • 7             |                  |          | XS 9=              |                        | OR   | XS18=               | 126                    |  |
| INDEPENDENT CLAIMS   |  |   |              |                                       | 0               |                  |          | X43=               |                        | OR   | X86=                |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |              |                                       |                 |                  |          | +145=              |                        | OR   | +290=               | -                      |  |
| * If the difference in column 1 is less than zero, e   |  |   |              |                                       | <b>"0"</b> in 0 | column 2         |          | TOTAL              |                        | OR   | TOTAL               | 896                    |  |
|  |  |   |              |                                       |                 | (Column 3)       | <u>L</u> | SMALL              | ENTITY                 | OR   | OTHER<br>SMALL      |                        |  |
| <b>AMENDMENTA</b>  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHE<br>NUMB<br>PREVIO<br>PAID F     | IER<br>USLY     | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | . 27                                      | Minus        | -2                                    | 7               | 0                |          | X\$ 9=             |                        | OR   | X\$18±              |                        |  |
|  | Independent  | NTATION OF MI                             | Minus        | ENDENT                                | <u> </u>        | 1=/2             |          | X43=               |                        | OR   | X85=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |              |                                       |                 |                  | ' [      | +145≈              |                        | OR   | +290=               |                        |  |
| ·  |  |   |              |                                       |                 |                  | A        | TOTAL<br>DDIT. FEE |                        | OR   | TOTAL               |                        |  |
|  | <del></del>  | (Column 1)                                |              | (Colum                                |                 | (Column 3)       |          |                    |                        | `    | <b>y</b>            | V                      |  |
| ٤.   |  | REMAINING<br>AFTER<br>AMENDMENT           |              | HIGHE<br>NUMB<br>PREVIOU<br>PAID F    | ER<br>JSLY      | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | • '                                       | Minus        | **                                    |                 | =                |          | X\$ 9=             |                        | OR   | X\$18=              |                        |  |
|  | Independent  | •   | Minus        | ***                                   |                 | =                |          | X43= ·             | •                      | OR   | X86=                | ·                      |  |
|  | PIRST PRESE  | NTATION OF MU                             | LIIPLE DEP   | ENDENT                                | CLAIM           | لللاند           |          | +145=              |                        | OR   | +290=               |                        |  |
|  |  |   |              |                                       |                 |                  |          | TOTAL<br>DIT. FEE  |                        | n i. | TOTAL<br>UDDIT, FEE |                        |  |
| (Column 1) (Column 2) (Column 3)   |  |   |              |                                       |                 |                  |          |                    |                        |      |                     | ·                      |  |
| MEN  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | R<br>ISLY       | PRESENT<br>EXTRA |          |                    | ADDI-<br>IONAL<br>FEE  |      | RATE ·              | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | •   | Minus        | **                                    |                 | =                |          | X\$ 9=             |                        | OR   | X\$18=              |                        |  |
|  | Independent  |   | Minus        | ***                                   |                 |                  |          | X43=               |                        | OR   | X86=                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |              |                                       |                 |                  |          |                    |                        | ı    | +290=               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20" |  |   |              |                                       |                 |                  |          |                    |                        | DR L | TOTAL               |                        |  |
|  | The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                                       |                 |                  |          |                    |                        |      |                     |                        |  |